CANDIDAT CAMPAIGI	FORM C/OH COVER SHEET PG 1				
The C/OH Instruction G	Guide explains how to complete this form. 1 ACCOUNT# (Ethics Commission filers)	2 Total pages filed.			
3 CANDIDATE / OFFICEHOLDER	MS/MRS/MR FIRST MI E	OFFICE USE ONLY			
NAME	- Bonnet Jr.	Date Recepted III			
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address	ADDRESS (POBOX APTISUITER) CITY STATE: ZIP CODE 3401 W: Parmer Ln. #1725 Austin, Tx 78727	Date Hand-delivation of Dales Postmarked			
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE • PHONE NUMBER EXTENSION — (512) 692-9476 —	Receipt # Amount			
⁶ CAMPAIGN TREASURER NAME	MS/MRS/NP FIRST MI E MY, G/EN E NICKNAME LAST SUFFIX BONNET Jr.	Date Imaged			
7 CAMPAIGN TREASURER ADDRESS (Residence of business)	STREET ADDRESS (NO POBOX PLEASE). APT I SUITE H. CITY. STATE. 3401 LV: PRIVMEY LH. #1725;	Austin, Tx 78727			
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION — (512) 692 - 9476 —				
9 REPORTTYPE	January 15 36th day before election Final report (Altach C/OH - FA	Exceeded \$500 limit 15th day after campaign freasurer appointment (officerorder only)			
10 PERIOD COVERED	Month Day Year THROUGH Month Day	/ N/A			
11 ELECTION	Month Day Year ELECTION TYPE 11 \$\phi 7 \phi \omega \omega \text{Primary} \text{Runc#} \text{Runc#}	Genera Special			
12 OFFICE	OFFICE HELD (if any) 13 OFFICE SOUGHT (# know Travis Coun	1 ()			
14 NOTICE OF DIRECT CAMPAIGN EXPENDITURE	Direct campaign expenditures are campaign expenditures made by others without the candidate's prior consent or approval Candidates are required to disclose this information only if they receive notification of the direct campaign expenditure Name				
BY OTHER INDIVIDUALS	Address / PC Box Apt / Suite # City State Zip Cotte				
addisional nages					
	GO TO PAGE 2				

CANDIDATE / OFFICEHOLDER REPORT:

FORM C/OH

SUPPORT & TOTALS			COVER SHEET PG 2		
15 C/OH NAME	Bonnet	. Tr.	16 ACCOUNT # (Ethics Commission Filers		
17 NOTICE FROM POLITICAL COMMITTEE(S)	"This po> is for notice of political expenditures by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures.				
N/A	COMMITTEE TYPE	COMMITTEE NAME N/A			
17	SPECIFIC	COMMITTEE ADDRESS			
[] adrkt onal pages		COMMITTEE CAMPAIGN FREASURER NAME	. 9		
		COMMITTEE CAMPAIGN TREASURER ADDRESS			
18 CONTRIBUTION TOTALS		POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN ES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED			
	i	POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ Ø		
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED		\$ Ø		
	4. TOTAL	POLITICAL EXPENDITURES	\$ Ø		
CONTRIBUTION BALANCE	5. TOTAL OF REP	SAY S			
OUTSTANDING LOAN TOTALS		PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF T AY OF THE REPORTING PERIOD	HE S		
19 AFFIDAVIT	LESLIE EDITH FER Notary Public, State My Commission 6 SEPT. 14, 20	is true and correct and includes all me under Title 15, Election Code.	perjury, that the accompanying report information required to be reported by didate or Officeholder		
MALE YSATON XIAAA			201B		
Sworn to and subscri	_	the said Clen E. Bonnet Jr. rtify which, witness my hand and seal of office.	, this theday		
Vishezan Signification of officer and	dministering says		KasState Notary Title of officer administering oath		

Te	xas Eth	nics Commission P.O. Box 12070 Austin, Texas 78711-2070	(512) 463-5800	1-800-325-8506		
		NDIDATE / OFFICEHOLDER REPORT: SIGNATION OF FINAL REPORT	FORM C	OH - FR		
		nstruction Guide explains how to complete this form. poplete only if "Report Type" on page 1 is marked "Final Report" ••				
3	COH N SIGNA	NAME N Bonnet, Jr.	2 ACCOUNT #	(Ethics Commiss on filers)		
	that des	Ži)	ent. I also understa	r appointment		
4		R WHO IS NOT AN OFFICEHOLDER Inplete A & B below only if you are not an officeholder. ••				
	A.	CAMPAIGN FUNDS				
	Chec	ck only one:				
	X	I do not have unexpended contributions or unexpended interest or income ea	arned from political of	contributions.		
	I have unexpended contributions or unexpended interest or income earned from political contributions. I understand that I may not convert unexpended political contributions or unexpended interest or income earned on political contributions to personal use. I also understand that I must file an annual report of unexpended contributions and that I may not retain unexpended contributions or unexpended interest or income earned on political contributions longer than six years after filing this final report. Further, I understand that I must dispose of unexpended political contributions and unexpended interest or income earned on political contributions in accordance with the requirements of Election Code, § 254,204					
	8.	ASSETS				
	Chec	ck only one:				
	×	I do not retain assets purchased with political contributions or interest or contributions.	other income from	political		
		I do retain assets purchased with political contributions or interest or other incl. I understand that I may not convert assets purchased with political contributions from political contributions to personal use. I also understand that I must dispolitical contributions in accordance with the requirements of Election Code, §	ions or interest or o spose of assets pur	ther income		
			Signature of Candid	date		
5		CEHOLDER uplete this section <i>only</i> if you are an officeholder ••				
	نآ	I am aware that I remain subject to filing requirements applicable to an officeholde treasurer on file. I am also aware that I will be required to file reports of unexpell cease holding office, I retain assets purchased with political contributions oppolitical contributions.	ended contributions if	f, at the time		

Signature of Officeholder

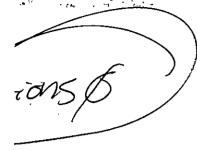
Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 1-800-325-8506 W-KIND CONTRIBUTION OR POLITICAL EXPENDITURE SCHEDULE T FOR TRAVEL OUTSIDE OF TEXAS 1 Total pages Schedule T The instruction Guide explains how to complete this form. 3 ACCOUNT # (Ethics Commission filers) 2 FILER NAME 4 Name of Contributor Corporation or Labor Organization / Pledgor / Payee 5 Contribution / Expenditure reported on Schedule A Schedule B Schedule C Schedule D Schedule F Schedule G SPAC-T Schedule H PAC-T Schedule N COH-UC COH-T 7 Name of person(s) traveling 6 Dates of travel 8 Departure city or name of departure location 9 Destination city or name of destination location 11 Purpose of travel (including name of conference, seminar, or other event) 10 Means of transportation Name of Contributor / Corporation or Labor Organization / Pledgor / Paye Contribution / Expenditure reported on: Schedule C Schedule A Schedule B Schedule D Schedule F Schedule G SPAC T Schedule H Schedule N □ сон-ис CON-T PAC-T Name of person(s) traveling Dates of travel Departure city or name of departure location Destination city er name of destination location Weans of transportation Purpose of travel (including name of conference, seminar, or other event) Name of Contributor / Corporation or Labor Organization / Pledgor / Payee Contribution / Expenditure reported on Schedule A Schedule B Schedule C Schedule D Schedule F Schedule G SPAC-T PAC-T ≸chedule H Schedule N COH-UC Name of person(s) traveling Dates of travel Departure city or name of departure location Destination city or name of destination location Means of transportation Purpose of travel (including name of conference, seminar, or other event) ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

neti Ut. Parmer Ln #1725 28727

AUSTIN TX 787

30 JAN 2007 PM 3 T





Dana PeBeauvior Travis County Clerk Elections Division PO Box 149325 Austin, TX 78714-9325

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